THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (c) The Mckinsey Report details the current health scenario in India assessing health care demand as also infrastructure required in 2012, emphasizing the need for private participation, as also the agenda for both Govt. and industry.

One of the Government initiatives to facilitate the growth of quality health care as contained in the Report relates to stimulating private investment in health care by (a) according 'priority sector' status to the health care segment and (b) identifying specific locations that need better health care facilities and incentivise private spending in these locations through various concessions.

The National Health Policy-2003 welcomes participation of the private sector in all areas of health activities, primary, secondary or tertiary with appropriate regulatory mechanism.

**Relation between economic growth and expenditure on health**

1158. SHRI NANA DESHMUKH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that India's expenditure on health is very low and it is not even one per cent of its Gross National Product (GNP);

(b) if so, the reasons therefor;

(c) whether it is also a fact that economic growth of every country that has neglected this sector has not been able to achieve a sustained high economic growth and this very fact has been acknowledged by the Minister of herself; and

(d) if so, the steps being taken to augment the expenditure on every citizens' health?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (d) Improved health of the people is an important factor for promoting economic growth. However, budgetary allocation for different sectors is decided keeping in view the overall availability of budgetary resources and sectoral priorities. The health expenditure in the country as a percentage of GDP has been approximately 4.9% in the year 2000, of which public expenditure on health is 0.9% of

GDP. The National Health Policy, 2002 also envisages increasing the health expenditure by Government as a percentage of GDP from the existing 0.9% to 2.0% by 2010. Government has been making every effort to augment the resources for health sector by mobilizing external assistance by various bilateral and multilateral agencies for supporting various National Disease Control Programmes. Health infrastructure in certain States is also being upgraded with World Bank assistance. The Tenth Plan Outlay for Central Health Sector has been fixed at Rs. 9253 crore compared to Rs. 5118 crore during the Ninth Plan.

**Illegal abortions**

1159. SHRI RAVULA CHANDRA SEKAR REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that for each registered legal abortion, there are at least eleven illegal abortions;

(b) whether Government have analysed why so many women prefer to by-pass the legal route;

(c) if so, the details thereof; and

(d) the action taken to provide all needy women adequate, safe and human services such as health care, pre-natal care, child care and reliable contraception?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) No reliable data exists on the incidence of registered legal abortion *vis-a-vis* illegal abortion in India. The Indian Council of Medical Research (ICMR) in 1983-85 carried out a study in five States of India, *i.e.* Haryana, Orissa, Rajasthan, Tamil Nadu and Uttar Pradesh. The extent of illegal abortion was 13.3 per 1000 pregnancies compared to legal abortion, which were 6.1 per 1000 pregnancies.

(b) and (c) Reasons for unsafe (illegal) abortions include: lack of information/knowledge about availability of services and about dangers of unsafe abortions; Social values, prejudice, and stigma attached to abortion, decision making by the head of the family and not by the pregnant woman; as yet, insufficient infrastructure and lack of trained manpower and/or equipment lack of privacy/confidentiality and shortage of approved MTP clinics due to delays in recognition of private clinics.